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Bib Data Sheet

CONFIRMATION NO. 4143

|   |   |                               |   |   |                                |
|---|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/925,958  | <b>FILING DATE</b><br>08/09/2001<br><b>RULE</b>   | <b>CLASS</b><br>713           | <b>GROUP ART UNIT</b><br>2131   | <b>ATTORNEY DOCKET NO.</b><br>18133-090 |                                |
| <b>APPLICANTS</b><br>Thomas F. Wenisch, Narragansett, RI; <i>WFL</i><br>Stephen R. Berard, Seattle, WA;<br>David J. Smith, East Greenwich, RI;  |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b> <i>WFL</i>  |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b> <i>WFL</i>   |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/13/2001</b>  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>WFL</i><br>Verified and Acknowledged <i>WFL</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>RI | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>34               | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>Thomas M. Sullivan, Esq.<br>Mintz, Levin, Cohn, Ferris<br>Glovsky and Popeo, P.C.<br>One Financial Center<br>Boston, MA 02111<br><i># 30623</i>   |   |                               |   |   |                                |
| <b>TITLE</b><br>Computer network security system  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>1202  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |